DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION As a below named inventor, I hereby declare that:

ATTORNEY DOCKET NO. 10003782-2

as US Application Serial No. or PCT International Application

() was filed on

My residence/post office address and citizenship are as stated below next to my name:

the specification of which is attached hereto unless the following box is checked:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Fiber Optic Receiver With An Adjustable Bandwidth Post-Amplifier

Number		and was ame	nded on		(if applicable).		
I hereby state that I including the claims, disclose all information	as amen	ded by any am	endment(s) referred to above 	e. I acknowled	d specification, Jue the duty to	
Foreign Application(s) and	l/or Claim of	Foreign Priority					
I hereby claim foreign pri inventor(s) certificate liste a filing date before that or	ed below and	have also identifie	d below an	y foreign application for	any foreign applicat patent or inventor(tion(s) for patent or s) certificate having	
COUNTRY		APPLICATION NUM	MBER	DATE FILED	PRIORITY CLAIMEO	III/DER 35 U.S C. 119	
					YES:	NO:	
					YES-	NO:	
Provisional Application							
I hereby claim the benefi below:	t under Title	35, United States	Code Secti	on 119(e) of any United	l States provisional	application(s) listed	
	API	LICATION SERIAL NUMB	ER	FILING DATE			
U. S. Priority Claim I hereby claim the benefi insofar as the subject ma manner provided by the f information as defined in application and the nation	itter of each first paragrap Title 37, Cod	of the claims of th h of Title 35, Unit le of Federal Reguli	is application ed States Cations, Sect	on is not disclosed in the Code Section 112, I ack ion 1.56(a) which occur	e prior United State nowledge the duty	es application in the to disclose material	
APPLICATION SERIAL N	UMBER	FILING OAT	E	STATUS (patented/pending/abandor	ned)	
					**************************************	,	
POWER OF ATTORNEY: As a named inventor, I business in the Patent and				and/or agent(s) to pros	ecute this applicati	ion and transact all	
Custom	ner Number	022878		Place Customer Number Bar Code Label here			
Send Correspondence				Direct Telepho	ne Calls To:		
AGILENT TECHNOLOGIES Legal Department, 51U-PD				Pamela Lau Kee			
Intellectual Property Administration P.O. Box 58043				(408) 553-3059			
Santa Clara, California 95052-8043							
I hereby declare tha made on informatio with the knowledg imprisonment, or bo false statements ma	n and be e that wi oth, under	ief are believed Ilful false state Section 1001	to be to ements a of Title 1	rue; and further the nd the like so ma 8 of the United St	at these statem ade are punish ates Code and	ents were made able by fine or that such willful	
Full Name of Inventor:	Michael A.	Robinson		Citizenship: U	s		
Residence:	40647 Ca	nyon Heights D	r. Fremo	ont, CA 94539			
Post Office Address:	Same as i	esidence					
Tilulter Andre				3-16-	2001	4	
Rev 10/00 (DecPwr)		age Two For Addition	al Inventor(s)	Date Signature(s))	P	ago 1 of 2	

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10003782-2

	Full Name of # 2 joint inventor:	Charles Graeme Ritchie		Citizenship: GB				
	Residence:	260 Dales Road Ipswich Suffolk	gland					
	Post Office Address:	Cama as Pasidanas						
	Inventor's Signature		3 -	23-2001				
	Inventor's Signature		Date					
		4						
	Full Name of # 3 Joint inventor:		21 C.	Citizenship: US Juan Ct CosAltes CA 94022				
	Residence:	571 Anza Mt View GA 94041 Same as residence	11 Jan	May CI COALOG (A 1402L				
	Post Office Address:		2 1/	70.01				
	het GV fl. /V(())	miald	5 1 6 Date	-7001				
	Full Name of # 4 joint inventor	:		Citizenship:				
	Residence:							
44.5	Post Office Address:	NAME OF THE OWNER OWNER OF THE OWNER OWNE						
0								
40	Inventor's Signature		Date					
T								
T	Full Name of # 5 joint inventor			Citizenship:				
W	Residence:	**************************************						
9	Post Office Address:							
23	Inventor's Signature		Date					
1								
100	Full Name of # 6 joint inventor	r:		Citizenship:				
Selb	Residence:							
	Post Office Address:							
	Inventor's Signature		Date					
		r:		Citizenship:				
	Residence:							
	Post Office Address:							
	Inventor's Signature		Date					
				Pro-				
	Full Name of # 8 joint invento	r:		Citizenship:				
	Residence:							
	Post Office Address:							
	Inventor's Signature		Date					